

ALTERNATIVE CARE HOME AND SAFETY CHECKLIST (CS-45)

PURPOSE:

This form is to be used prior to licensing, for foster care providers; or placement, when considering a family as a kinship or relative care provider (family or agency arranged); and at the time of license renewal. This form will give the worker enough information to determine whether a potential home meets the required safety standards to be considered for licensure.

- Investigators may use this form during an investigation at the time when it is determined that the child(ren) cannot remain in their household until certain changes have been made and a potential kinship or relative care provider has been identified (CS-45 should also be completed if the placement will be done on a voluntary basis);
- Family Centered Services workers may use this form when they have a family in crisis – when the child(ren) are in need of kinship/relative care (CS-45 should be completed if the placement will be done on a voluntary basis);
- Family-centered Out-Of-Home Care workers will use this when they have located a kinship or relative placement for a child already in care;
- Licensing workers will use this form with all homes during the licensing and renewal processes.

The form is divided into the following sections:

- A. Potential Placement Family Personal Information;
- B. Care and Supervision of Youth;
- C. The Placement Home – Physical and Safety Requirements;
- D. Health Care Policies;
- E. Policies Relating to Illness/Emergencies; and
- F. Expectations of the Placement Provider (this section does not need to be completed when assessing a home for family arranged kinship or relative care).

The CS-45 shall be used to evaluate whether or not the potential resource home meets the required safety standards, as well as to inform the potential provider of their expectations and to gain general information from the potential provider. A potential provider should be given an opportunity to correct any safety concerns, however, they can not be licensed until the home meets safety standards.

NUMBER OF COPIES AND DISPOSITION:

Copies of this checklist should be maintained in the resource provider's file and a copy should be placed in the child's family file for all relative and kinship placements. A copy should also be provided to the resource family. A copy should be given to the court for all court involved relative or kinship placements (family or agency arranged).

INSTRUCTIONS FOR COMPLETION:

The form is a checklist, designed to be completed quickly, yet address important issues with regard to safety and Foster Family Home licensing rules. All sections are to be completed on

this form. When using this form at the point of reassessment, write "UPDATE" at the top of the front page of this form.

This should be completed in ink, and it should be completed in the field. Writing should be legible and easy to read. The data requested is self-explanatory. All sections should be answered.

MEMORANDA HISTORY: CS00-33, CD07-